FORM D

SEC Mail UNITED STATES
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Section Washington, D.C. 20549

MAR 14 2008

FORM D

Washington, DC PURSUANT TO REGULATION D,
106 SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1430074	
OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	April 30, 2008
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SEC USE ONLY									
Prefix		Serial							
DATE RECEIVED									

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)	
Malbec Emerging Markets Opportunities Fund LLC: Limited Liability Company Units	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Section 4((6) ULOE
Type of Filing: New Filing	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	1 14 4 14 16 16 17 14 14 16 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)	TARAK TOTA IRAK EKTI DIBIR MEDA JAWA KEDU BAK KEDI
Malbec Emerging Markets Opportunities Fund LLC	08042325
Address of Executive Offices (Number and Street, City, State, Zip Code) Tel	ephone Number (incl.Area Code)
	212) 271-4000
Address of Principal Business Operations (Number and Street, City, State, Zip Codo UCESSE Tel	ephone Number (Incl. Area Code)
(if different from Executive Offices)	
Brief Description of Business MAR 2 5 2008	
To operate as a private investment vehicle.	
Type of Business Organization	
Type of Business Organization Corporation Dimited partnership, already formed Limited partnership, already formed	ease specify)
□ business trust □ limited partnership, to be formed □ Limited Lia	bility Company
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 1 0 8	al
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	,
State: CN for Canada; FN for other foreign jurisdiction)	DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (602)

Persons who respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 8

A. BASIC IDENTIFICATION DATA								
2. Enter the information requested for the following:								
* Each promoter of the issuer, if the issuer has been organized within the past five years;								
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
* Each general and managing partner of partnership issuers.								
Check Box(es) that Apply: ☐ Promoter* ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or *Issuer's Investment Manager Managing Partner								
Full Name (Last name first, if individual)								
Malbec Partners, Inc.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
200 Park Avenue, New York, NY 10166								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *Member of Issuer's Board of Managers Managing Partner								
Full Name (Last name first, if individual)								
Casper, Stephen P.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
200 Park Avenue, New York, NY 10166								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *Member of Issuer's Board of Managers Managing Partner								
Full Name (Last name first, if individual)								
Harris, Clive								
Business or Residence Address (Number and Street, City, State, Zip Code)								
200 Park Avenue, New York, NY 10166								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *Member of Issuer's Board of Managers Managing Partner								
Full Name (Last name first, if individual)								
Linford, Gary								
Business or Residence Address (Number and Street, City, State, Zip Code)								
200 Park Avenue, New York, NY 10166								
Check Box(es) that Apply:								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply:								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								

B. INFORMATION ABOUT OFFERING								1				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									Yes □	No ☑		
2. W	hat is the m	inimum inves	tment that w	ill be accep	ted from an	y individua	1?					0,000 (Class Land B Units)
*The Board of Managers may accept lesser amount in its sole discretion.								25,0	00 (Class C Inits)			
. 3. Does the offering permit joint ownership of a single unit?										Yes Ø	No	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									offering. th a state			
Full Na		ime first, if in	dividual)									
Busine	ss or Reside	nce Address (Number and	Street, City	y, State, Zip	Code)	<u> </u>	-				
<u> </u>		10 1 0	. ,									
		d Broker or D					************		 -			
		rson Listed H s" or check in						***************************************				All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]			[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
[RI]		[SD] me first, if in	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ruii iva	iiiie (Last iii	iine msi, n m	uividuai)									
Busine	ss or Reside	nce Address (Number and	Street, City	y, State, Zip	Code)						
Name o	of Associate	d Broker or D	ealer									
		rson Listed H s" or check in							**************			All States
` {AL]			[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[1A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]			[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	ime (Last na	me first, if in	dividual)									
Busines	ss or Reside	nce Address (Number and	Street, City	y, State, Zip	Code)						·····
Name o	of Associate	d Broker or D	ealer									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)								☐ All States				
(AL)			[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H1]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

[TN] [TX] [UT] [VT] [VA] [WA] [WV] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security		Aggregate Offering Price	Amount Already Sold
	Debt	\$	-	\$ 0
	Equity			\$ 0
	□Common □ Preferred	_	<u>-</u>	 -
	Convertible Securities (including warrants)	s	0	\$ 0
	Partnership Interests	\$_	0	\$ 0
	Other (Specify) Limited Liability Company Units	\$	400,025	\$ 400,025
	Total	s –	400,025	\$ 400,025
	Answer also in Appendix, Column 3, if filing under ULOE.	_	·	-
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
			Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	_	4	\$ 400, 025
	Non-accredited Investors		0	\$ 0
	Total (for filings under Rule 504 only)		N/A	\$ N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.			
	Type of offering		Type of Security	Dollar Amount Sold
	Rule 505		N/A	\$ N/A
	Regulation A	_	N/A	\$ N/A
	Rule 504	_	N/A	\$ N/A
	Total		N/A	\$ N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs		o	\$
	Legal Fees		☑	\$ 945
	Accounting Fees		0	\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			\$
	Total		☑	\$ 945

	C. OFFERING PRICE, I	NUMBER OF INVESTORS, EX	PENS	SES A	AND USE OF P	ROCE	ĘDS	
	 b. Enter the difference between the aggreg- Question 1 and total expenses furnished difference is the "adjusted gross proceeds to 	in response to Part C - Question 4	a. Th	is		\$_		399,080
5.	Indicate below the amount of the adjusted to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted groto Part C - Question 4.b. above.	If the amount for any purpose is not the left of the estimate. The tot	t know al of th	n, 1e				
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees		. 🗖	\$ _			\$ _	
	Purchase of real estate		. 🗖	\$_			\$_	
	Purchase, rental or leasing and installation	of machinery and equipment	. 🗖	\$			\$_	
	Construction or leasing of plant buildings a	nd facilities	. 🗖	\$		_	\$,
	Acquisition of other businesses (including this offering that may be used in exchar another issuer pursuant to a merger)	ige for the assets or securities of	. 🗖	\$ _			s _	
	Repayment of indebtedness		. 🗖	\$			\$	
	Working capital		. 🗆				\$	399,080
	Other (specify			_		_		
				\$			\$	
	Column Totals		_	•			\$_	399,080
	Total Payments Listed (column totals added	I)	···		⊠ \$	399	,080	
		D. FEDERAL SIGNAT	URE				Ĭ	
fc	he issuer has duly caused this notice to be ollowing signature constitutes an undertaking its staff, the information furnished by the issue.	by the issuer to furnish to the U.S.	Securit	ies ar	nd Exchange Comm	nission,	upon	
Мa	er (Print or Type) Ibec Emerging Markets portunities Fund LLC	Signature States F. E.	Jan	4.	Date March // , 20	೧ ৪		. , , , , , , , , , , , , , , , , , , ,
	ne of Signer (Print or Type)	Title of Signer (Print or Type)		$\overline{}$			•	
	Stephen ? Casper	Monday of 1550	2-10	b	and of M.	dene	ege	نوج ا

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

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